

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>	Attorney Docket No. <b>01-506</b> First Inventor or Application Identifier <b>ISHIKAWA et al.</b> Title <b>MULTI-OUTPUT ELECTRIC POWER SOURCE DEVICE AND VEHICLE-MOUNTED ELECTRONIC CONTROL DEVICE</b> Express Mail Label No.
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(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Commissioner for Patents Mail Stop Patent Application Alexandria, VA 22313-1450
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1. ☒ \* Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☒ Specification [Total Pages **42**]
  - Descriptive title of the Invention
  - Cross Reference to Related Applications
  - Background of the Invention
  - Summary of the Invention
  - Brief Description of the Drawings
  - Detailed Description of the Preferred Embodiment
  - Claims
  - Abstract of the Disclosure
3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **7**]
4. Oath or Declaration [Total Sheets **4**]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 16 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

5. ☐ Microfilm Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Copy
  - b. ☐ Paper Copy (identical to computer copy)
  - c. ☐ Statement verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

7. ☒ Assignment Papers (cover sheet & document(s))
8. ☐ 37 C.F.R. § 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
9. ☐ English Translation Document (if applicable)
10. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503) (should be specifically itemized)
  - \*Small Entity Status still proper and desired
13. ☐ Statement(s) filed in prior application, (PTO/SB09-12) ☐ Status still proper and desired
14. ☒ Certified Copy of Priority Document(s) (if foreign priority is claimed)
15. ☐ Other: .....

NOTE FOR EXAMINERS: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28)

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:
- ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

Group/Art Unit: \_\_\_\_\_

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>17. CORRESPONDENCE ADDRESS</b>	
<input checked="" type="checkbox"/> Customer Number or Bar Code Label <b>23400</b> (Insert Customer No. or Attach bar code label here)	or <input type="checkbox"/> Correspondence address below
Name _____	
Address _____	
City _____	State _____ Zip Code _____
Country _____	Telephone (703) 707-9110 Fax (703) 707-9112

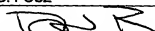
Name (Print type)	DAVID G. POSZ	Registration No. (Attorney/Agent)	37,701
Signature		Date	Sept. 26, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Arlington, VA 22202. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Alexandria, VA 22313-1450.

22313 U.S. PTO  
 10/16/03  
 09/26/03

<h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">for FY 2003</h2> <p style="text-align: center;"><i>Patent fees are subject to annual revision.</i></p>		<i>Complete if Known</i>	
		Application Number	
		Filing Date	
		First Named Inventor	
		Examiner Name	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Group/Art Unit	
TOTAL AMOUNT OF PAYMENT		(\$) <b>790</b>	
		Attorney Docket No. <b>01-506</b>	

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																																																																																																											
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: <b>50-1147</b> Deposit Account Name: <b>POSZ &amp; BETHARDS, PLC</b> <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity Fee Code (A)</th> <th>Small Entity Fee Code (B)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051 65</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052 25</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053 130</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812 2,520</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804 920*</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805 1,840*</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251 55</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252 205</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253 480</td><td></td></tr> <tr><td>1254</td><td>1450</td><td>2254 725</td><td></td></tr> <tr><td>1255</td><td>1970</td><td>2255 985</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401 160</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402 160</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403 140</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451 1,510</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452 55</td><td></td></tr> <tr><td>1453</td><td>1,300</td><td>2453 650</td><td></td></tr> <tr><td>1501</td><td>1300</td><td>2501 650</td><td></td></tr> <tr><td>1502</td><td>470</td><td>2502 235</td><td></td></tr> <tr><td>1503</td><td>630</td><td>2503 315</td><td></td></tr> <tr><td>1480</td><td>130</td><td>1480 130</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807 50</td><td></td></tr> <tr><td>1808</td><td>180</td><td>1808 180</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021 40</td><td></td></tr> <tr><td>1809</td><td>750</td><td>2809 375</td><td></td></tr> <tr><td>1810</td><td>750</td><td>2810 375</td><td></td></tr> <tr><td colspan="3">Other fee (specify) _____</td><td></td></tr> <tr><td colspan="3">Other fee (specify) _____</td><td></td></tr> <tr><td colspan="3">SUBTOTAL (3)</td><td><b>40</b></td></tr> </tbody> </table>				Large Entity Fee Code (A)	Small Entity Fee Code (B)	Fee Description	Fee Paid	1051	130	2051 65		1052	50	2052 25		1053	130	1053 130		1812	2,520	1812 2,520		1804	920*	1804 920*		1805	1,840*	1805 1,840*		1251	110	2251 55		1252	410	2252 205		1253	930	2253 480		1254	1450	2254 725		1255	1970	2255 985		1401	320	2401 160		1402	320	2402 160		1403	280	2403 140		1451	1,510	1451 1,510		1452	110	2452 55		1453	1,300	2453 650		1501	1300	2501 650		1502	470	2502 235		1503	630	2503 315		1480	130	1480 130		1807	50	1807 50		1808	180	1808 180		8021	40	8021 40		1809	750	2809 375		1810	750	2810 375		Other fee (specify) _____				Other fee (specify) _____				SUBTOTAL (3)			<b>40</b>
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	<b>DAVID G. POSZ</b>	Registration No. (Attorney/Agent)	<b>37,701</b>
Signature		Telephone	<b>(703) 707-9110</b>
		Date	<b>September 26, 2003</b>

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